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Promotion and protection of the rights of children

Follow-up to the outcome of the special session of the General Assembly on children

Report of the Secretary-General

Summary

The present report assesses the steps taken in 2016 to achieve a world fit for children, highlighting the gaps in achievement as well as the strategic shifts necessary to achieve the unmet goals.

The report has been prepared in response to General Assembly resolution S-27/2, adopted at the twenty-seventh special session in 2002, and resolutions 58/282 and 61/272, in which the Assembly requested the Secretary-General to report regularly on progress made in implementing the Plan of Action included in the annex to resolution S-27/2.

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I. Introduction

1. At the special session of the General Assembly on children, held in 2002, delegations from 190 countries adopted the document entitled "A world fit for children" (resolution S-27/2, annex), containing a Declaration and Plan of Action. In the document, Governments made a commitment to a time-bound set of goals for children and young people, with a particular focus on: (a) promoting healthy lives; (b) providing quality education; (c) protecting children against abuse, exploitation and violence; and (d) combating HIV and AIDS. The present report provides the fifteenth update on progress made in follow-up to the special session.

2. In General Assembly resolution 65/1, Member States made a further commitment to accelerating progress towards achieving the Millennium Development Goals. Subsequently, during the high-level meeting held in 2014 to mark the twenty-fifth anniversary of the Convention on the Rights of the Child, Member States, United Nations agencies and their partners made a commitment to work together to ensure that every child is given a fair chance in life.

3. The past year marked the first year of implementation of the wide-ranging global accords reached in 2015, including the 2030 Agenda for Sustainable Development (General Assembly resolution 70/1); the Sendai Declaration and the Sendai Framework for Disaster Risk Reduction 2015-2030 adopted at the Third United Nations World Conference on Disaster Risk Reduction (resolution 69/283, annexes I and II); the Paris Agreement under the United Nations Framework Convention on Climate Change; and the Addis Ababa Action Agenda of the Third International Conference on Financing for Development. The year also witnessed the completion of the quadrennial comprehensive policy review of operational activities for development of the United Nations system (see General Assembly resolution 71/243) and the adoption of the New York Declaration for Refugees and Migrants (Assembly resolution 71/1) and the New Urban Agenda (resolution 71/256, annex). Together with the commitments made at the first World Humanitarian Summit, held in Istanbul, Turkey, on 23 and 24 May 2016, these accords provide key directions to realizing the rights of all children, everywhere, and to achieving the vision of the 2030 Agenda for Sustainable Development, a world where no child is left behind.

4. A child's chance to survive and thrive was much greater in 2016 than it was when the global community adopted the Millennium Development Goals in 2000. There continues to be clear evidence of significant progress made in child survival, nutrition and primary school enrolment and in reduction of mother-to-child transmission of HIV, among other areas. The absolute number of children dying before their fifth birthday has fallen by more than half, from 12.7 million in 1990 to about 5.9 million in 2015. The percentage of stunted children under 5 years of age has declined from 40 per cent in 1990 to 23 per cent in 2016. In 2016, wasting continued to threaten the lives of an estimated 8 per cent of children under 5, or nearly 52 million children globally, while 41 million, or 6 per cent, were overweight. Close to 7 million deaths from malaria were averted between 2001 and 2015, primarily among children under 5 years of age in sub-Saharan Africa. The number of out-of-school children of primary school age worldwide has fallen by almost half in 15 years, from 106 million in 1999 to an estimated 61 million in 2014. In 2015, 91 per cent of the global population used an improved drinking water source, compared with 76 per cent in 1990.

5. However, persistent and in many cases growing inequalities continue, depriving the poorest and most excluded children of services to which they are entitled. In 2015, 2.4 billion people worldwide still lacked access to improved

sanitation facilities and 946 million continued to practise open defecation. An estimated 36.7 million people were living with HIV in 2015, approximately 1.8 million of whom were children younger than 15 years of age. The latest available survey data indicate that only 27 per cent of adolescent girls (age 15-19) and 32 per cent of adolescent boys (age 15-19) in sub-Saharan Africa have comprehensive knowledge of HIV. Regarding child marriage, the practice has slowly declined since the early 1990s, but the gap in global levels of child marriage between girls from the wealthiest and the poorest quintiles increased dramatically.

6. Humanitarian crises continued to rise in 2016,[1] with more than half a billion children — one out of every four children in the world — living in countries affected by conflict, natural disasters and epidemics by the end of the year.[2] In places such as Iraq, South Sudan, the Syrian Arab Republic and Yemen, acute conflicts are devastating the lives of children. Many of these conflicts, as well as those in countries such as Afghanistan and Burundi, have spilled over borders and generated subregional refugee crises, giving rise to grave violations of children's rights. While these conflicts have intensified, natural disasters have grown more prevalent. The 2015-2016 El Niño phenomenon generated life-threatening drought conditions across southern Africa and elsewhere. The year 2016 also saw new outbreaks of diseases such as cholera, yellow fever and Zika, and the consequent health emergencies have taken a heavy toll on children.

7. United Nations entities focused humanitarian action on saving lives, protecting children and addressing the underlying causes of vulnerability to crises. Globally, nearly 29 million people benefited from access to safe water, including more than 1.2 million displaced people in Iraq, through the expansion of water, sanitation and hygiene service centres. Nearly 2.5 million children with severe acute malnutrition accessed therapeutic feeding programmes, including some 219,000 conflict-affected children in South Sudan who benefited from treatment. More than 24 million children from 6 months to 15 years of age received measles vaccination, including more than 650,000 children under 1 year old in Yemen. More than 34,000 HIV-positive pregnant women continued antiretroviral therapy, including some 3,000 women affected by the conflict in the Central African Republic. United Nations entities reached nearly 12 million school-age children with formal or non-formal education, including more than 3.1 million children in the Syrian Arab Republic who received textbooks, stationery and school supplies. Nearly 3 million children benefited from psychosocial support, including some 312,000 children in the Lake Chad Basin (Cameroon, Chad, the Niger and Nigeria).

8. In 2016, United Nations entities continued to strengthen the link between humanitarian action and development programming, while promoting social cohesion, including by increasing the use of cash-based programming, improving accountability to affected populations and investing in early preparedness, and strengthening resilience and risk-informed programming through a vast network of partners. This includes government, civil society and the private sector, within the broader humanitarian system. In 2016, the World Food Programme and the United Nations Children's Fund (UNICEF) conducted their first joint emergency response simulation to further strengthen capacity.

[1] Office for the Coordination of Humanitarian Affairs, *Global Humanitarian Overview 2017*, available from www.unocha.org/sites/unocha/files/GHO_2017.pdf.

[2] "Nearly a quarter of the world's children live in conflict or disaster-stricken countries", UNICEF press release, 9 December 2016, available from www.unicef.org/media/media_93863.html.

II. Follow-up to the General Assembly special session on children

A. Planning for children

9. The 2030 Agenda for Sustainable Development (General Assembly resolution 70/1) was adopted in September 2015 and will be implemented globally over several years leading up to 2030. All of the Sustainable Development Goals are relevant to the lives of children and, taken together, amount to a holistic approach to meeting the needs of children, protecting them from harm, securing their environments and realizing their rights.

10. In the 2030 Agenda, children and youth are also recognized as possessing the ability to act as agents for change in shaping and creating more prosperous, inclusive and sustainable societies, economies and environments. Member States furthermore acknowledge that children, by gaining awareness of the issues, including through education, and participating in follow-up and review processes, can influence behaviours and social norms among themselves, their households, their families and their communities.

11. In the era of the Sustainable Development Goals, investing in all children and youth is imperative for building the human capital required to turn demographic transitions into dividends that reduce poverty and generate prosperity. In adopting the Goals, Member States renewed their commitments to children in agreeing to a future where no child is left behind. Leaving no child behind requires reflecting the rights and well-being of all children — in particular of the poorest and most vulnerable — at the centre of global, national and local plans, resource allocations and monitoring frameworks.

12. Eradicating poverty and promoting prosperity remains the central and ultimate mission of the 2030 Agenda. In order to accurately assess and address challenges facing millions of women, men and children in poverty, we must be able to count this least-documented segment of the world population. Improving national capacities and innovations in technology will be crucial in supporting adequate data collection, disaggregation, analysis and use, including participatory methods that enable all people to provide direct feedback on their lived experiences.

B. Promoting implementation of the Convention on the Rights of the Child

13. As at 18 May 2017, 196 States parties had ratified the Convention on the Rights of the Child. UNICEF continues to advocate and provide technical assistance to States parties for the ratification of the Convention and its three Optional Protocols. In 2016, Brunei Darussalam, Guinea, Pakistan, and Samoa ratified the Optional Protocol on the involvement of children in armed conflict, bringing the total number of ratifications to 166. Two States — Samoa and the United Arab Emirates — ratified the Optional Protocol on the sale of children, child prostitution and child pornography, bringing the total number of States parties to 173. Seven States — France, Georgia, Italy, Luxembourg, Peru, Samoa and Ukraine — ratified the Optional Protocol on a communications procedure, bringing the total number of ratifications to 30 by the end of 2016.

14. In 2016, the Committee on the Rights of the Child adopted two general comments. The first, general comment No. 19, on public budgeting for the realization of children's rights, identifies States parties' obligations and makes recommendations on how to realize all the rights under the Convention on the Rights of the Child through effective, efficient, equitable, transparent and

sustainable public budget decision-making. The second, general comment No. 20, on the implementation of the rights of the child during adolescence, provides guidance to States on the measures necessary to ensure the realization of the rights of children during adolescence.

C. Collaborating with partners and leveraging resources for children

15. While the largest volume of resources for development is domestic, development aid reached a new peak of $142.6 billion in 2016, an increase of 8.9 per cent from 2015 after adjusting for exchange rates and inflation. Discounting for the rise in aid spent on refugees in donor countries, aid rose 7.1 per cent. Official development assistance from the 29 member countries of the Development Assistance Committee of the Organization for Economic Cooperation and Development (OECD) averaged 0.32 per cent of gross national income, up from 0.30 per cent in 2015; it has not been at this level since 2005. The value of total official development assistance has increased by 102 per cent in real terms since 2000. Despite this progress, country-to-country aid to the least developed countries fell by 3.9 per cent in real terms from 2015 and aid to Africa fell 0.5 per cent. Within 2016 official development assistance, contributions by Development Assistance Committee donors to multilateral organizations rose by nearly 10 per cent in real terms. The share of multilateral aid to bilateral aid is now roughly equal.[3]

16. Results for children were leveraged in 2016 through a number of partnerships. For example, for the first time ever, the World Bank Group, UNICEF and the World Health Organization (WHO) collaborated in a $200 million direct International Development Association allocation for an emergency health and nutrition programme in Yemen. By April 2017, the programme had provided 375,000 children and 132,000 women with micronutrients, reached 71,032 children with treatment for various illnesses, provided 16,526 women with maternal services and trained 220 community health volunteers.

17. Global programme partnerships continue to advance the promotion and protection of children's rights. For example, building upon lessons learned from the "No Lost Generation" initiative, organizations have been working to champion the cause of children's education in emergencies and protracted crises, notably through the Education Cannot Wait fund, created in 2016 to aid efforts to reach all crisis-affected children and youth with safe, free, quality education by 2030. In addition, during 2016, UNICEF scaled up collaboration with relevant European Union institutions to protect children along migration routes and advocated for children's priorities to be reflected in relevant European Union policies, legislation and programmes.

D. Monitoring progress

18. When Heads of State assembled for the World Summit for Children in 1990, they had very limited information upon which to base targets to promote the survival, protection and development of children. Since then, there has been a revolution in the collection and use of robust, high-quality data.

[3] OECD, "Development aid rises again in 2016 but flows to poorest countries dip", 11 April 2017 (www.oecd.org/dac/financing-sustainable-development/development-aid-rises-again-in-2016-but-flows-to-poorest-countries-dip.htm); "Development aid rises again in 2016", 11 April 2017 (www.oecd.org/dac/financing-sustainable-development/development-finance-data/ODA-2016-detailed-summary.pdf).

19. Much of the recent progress on data for children has been spurred by the rapid expansion and innovation of international household surveys, such as the multiple indicator cluster survey, first used in 1995. In the 22 years since, over 300 such surveys have been undertaken in more than 100 countries, collecting data on a range of topics covering the situation of children and women. Data from the fifth round of these surveys, which commenced in 2013 and covered 42 countries, were used in the final assessment of the Millennium Development Goals and also formed the baselines for many of the Sustainable Development Goals and targets. The sixth round of multiple indicator cluster surveys commenced in the last quarter of 2016 and covers almost half of the Sustainable Development Goal indicators that require data collection through household sample surveys.

20. Systems for real-time information collection and engagement continue to be scaled up. By May 2017, U-Report, the social messaging platform, had over 3.2 million users in 35 countries. It was used in Latin America and the Caribbean in response to the outbreak of the Zika virus, leading to the launch of the first virtual online Zika Information Centre in January 2017, providing life-saving information to households in affected areas. It is also in continuous use by governments and partners to create real-time information flows with young people. Open-source systems like T-Watoto in the United Republic of Tanzania and MobileVRS in Uganda have dramatically raised rates of birth registration. In Uganda, for example, the rate rose from 37 per cent in 2013 to 60 per cent by the end of 2014. The RapidPro mobile platform, live in 41 countries, continues to help to reduce maternal and childhood mortality, including in rural areas of Zambia, where mothers who are HIV-positive can now find out the status of their child in half the time it used to take.

E. Participation and self-expression of children

21. Supporting the participation of children in the design, implementation, monitoring, and evaluation of programmes and policies forms an essential component of the 2030 Agenda. UNICEF has developed an adolescent and youth engagement framework to strengthen adolescent and youth engagement across its work, and has also coordinated advocacy with the first cohort of countries to undertake national reviews of the Sustainable Development Goals at the high-level political forum on sustainable development, providing guidance on including the voices of adolescents in the reports.

22. Numerous United Nations entities have championed efforts to promote and support adolescent engagement more systematically at the country level, including through support to student associations and councils. In Nepal, for example, the training of 934 child clubs on how to influence the decision-making of local governmental bodies advanced the creative thinking and advocacy skills of participants. In Bangladesh, support to adolescent clubs led to programme interventions on menstrual hygiene management and sexual and reproductive health, reaching almost 150,000 girls, and convinced the Government to invest further resources for additional clubs.

23. Participation programmes have also supported the engagement of children in public budgeting in Argentina, for example, where over 34,000 children took part in participatory budgeting processes in 30 municipalities. Consequently, youth participatory budgeting has now been included as a priority goal in the agenda of the National Secretariat of Municipal Affairs. Further, the social impact programme in Montenegro supported adolescents in designing and managing 16 social-change projects with 12,800 peers and 14 local organizations to tackle issues such as nationalism-fuelled violence and lack of equipment for teaching science in schools.

24. Continued support has been provided to skills development for employability and entrepreneurship. For example in Kosovo (under Security Council resolution 1244 (1999)), the "StartUp" initiative aims to prepare adolescents to become entrepreneurs, contribute to their economic empowerment and increase their access to and control of financial resources.

25. To promote the artistic, social and cultural participation of adolescents, support has been provided to the development of new platforms for adolescent self-expression, self-development and creative co-production. In Cuba, for example, 49,000 marginalized children and adolescents were given help to participate in cultural and social inclusion activities in several public institutions, including libraries, museums, theatres and community spaces. In Ethiopia, young people, in collaboration with religious and community leaders, have actively participated in large-scale community dialogue and social mobilization efforts, resulting in 20 districts publicly declaring the abandonment of female genital mutilation/cutting. In Madagascar, 550 young volunteers and peer educators were trained in the use of the communication for humanitarian action toolkit and engaged approximately 22,500 people in villages affected by floods on issues of sanitation and hygiene, nutrition and health through group theatre, quizzes and community radio.

26. Indicators that measure participation are being created and will form part of the adolescent country tracker developed by UNICEF and partners in 2016 for use by countries to monitor and track the development and participation of adolescents.

III. Progress in the four major goal areas of "A world fit for children"

A. Promoting healthy lives

27. As reported in 2015, the under-five mortality rate and the absolute number of under-five deaths per year have fallen by more than half since 1990. This means that an average of 19,000 young lives have been saved every day. The average annual rate of reduction in under-five mortality more than doubled, from 1.8 per cent in 1990 to 3.9 per cent in 2016. This has saved the lives of 122 million children below age 5 since 1990. The maternal mortality ratio declined less rapidly, but still substantially, decreasing from 385 deaths per 100,000 live births in 1990 to 216 in 2016.

28. Prior to birth, a mother can increase her child's chance of survival and good health by attending antenatal care consultations, being immunized against tetanus and avoiding smoking and use of alcohol. Yet, in 2016 only 58 per cent of pregnant women in developing countries had at least four antenatal care visits. Coverage of pregnant women with three doses of diphtheria-tetanus-pertussis vaccine was higher, at 86 per cent. Further, the joint WHO-United Nations Population Fund (UNFPA) report, "Maternal death surveillance and response", indicates that 86 per cent of countries have adopted a policy on maternal deaths notification, yet only 46 per cent of countries have a functional mechanism to systematically report, review and respond to maternal deaths.

29. Despite progress, 16,000 children under 5 still die every day, and serious inequities persist, with four fifths of global under-five mortality concentrated in Asia and sub-Saharan Africa, the latter shouldering half of that burden. Within countries, children from the poorest households are 1.9 times as likely to die before the age of 5 as children from the richest households. The world faces the urgent challenges of reducing dramatically the 2.6 million stillbirths that occurred in 2015 and continuing to step up action to prevent the 45 per cent of deaths that occur

during the first 28 days of life among children under 5. At the same time, greater attention is needed to reduce the risks to children from conflict, displacement and forced migration, climate change and other aspects of fragility.

30. United Nations entities are focused on bringing high-impact preventive and curative health services to the most vulnerable children and strengthening health systems at all levels, particularly the community level, as a key means of promoting equity. In 2016, these entities continued to support the scaling up of high-impact health interventions such as skilled birth attendance, immunization and child health services in high-burden countries and communities. In 2016, the number of young lives saved by high-impact health interventions reached an estimated 48 million.

31. Support continues for integrated community case management as a proven means of improving treatment access for children living in hard-to-reach contexts and communities. Acknowledging the centrality of community health workers within this model, UNICEF trained 74,381 community health workers in 2016. To support these community health workers, United Nations entities worked with Governments and local partners to strengthen supply chains. As a result, for example, there were no stock-outs of oral rehydration salts in 126 countries.

32. Immunization remains a central component of efforts related to child survival and health. By the end of 2016, 120 countries had reached at least 90 per cent national coverage for measles and 126 countries for diphtheria, tetanus and pertussis immunization for children under one year of age. Among 59 target countries, 41 had eliminated maternal and neonatal tetanus by the end of 2016. A total of 138 Governments were supported in vaccinating 61 million children against measles and 58 million children against diphtheria, tetanus and pertussis. UNICEF remained the largest global supplier of vaccines, procuring 2.5 billion vaccine doses in 2016 for 95 countries and reaching 45 per cent of the world's children. In partnership with Gavi, the Vaccine Alliance and the Bill and Melinda Gates Foundation, UNICEF played a crucial role in shaping the global vaccine market, harnessing competitive market forces and halving the weighted average price of pentavalent vaccine. The vaccine, which protects against five child-killing diseases — including diphtheria, tetanus and hepatitis B — is projected to save the lives of nearly 6 million children by 2020.

33. Eradication of polio remains a global priority. In 2016, the smallest number of children in history were paralysed by the disease, with 37 cases occurring in small geographical areas of Afghanistan, Nigeria and Pakistan. In 2016, over 17,000 community-based vaccinators were deployed to the highest-risk areas in Pakistan, resulting in the highest immunization coverage figures in those areas in the country's history, with the proportion of children missed in national campaigns falling from 25 per cent in 2014 to 5 per cent by the end of 2016. In response to the first detection of polio in two years in Nigeria, UNICEF, WHO and partners supported the Government of Nigeria in large-scale emergency immunization activities across the Lake Chad region, immunizing 116 million children, with special emphasis on children in high-risk areas.

34. Even though many of the risk factors can be prevented, the global disease burden from non-communicable diseases affecting children and adolescents is rapidly increasing. Globally, almost 25 million adolescents 13 to 15 years of age smoke tobacco and almost half of all adolescents are exposed to second-hand smoke in public places.

35. Well-nourished children are healthier, more resistant to disease and more likely to survive. As they grow, they are more able to learn, becoming more productive and better equipped to participate in and contribute to the life of their communities. Yet, malnutrition in all its forms remains a persistent challenge. The

estimated number of stunted children globally has declined from 170 million in 2010 to 155 million in 2016, with just over half living in Asia and over one third in Africa, where the number of stunted children is increasing.

36. While often associated with emergencies, the burden of wasting remains high in many stable contexts. In 2016, nearly 52 million children under age 5 suffered from wasting and 17 million from severe wasting. Over two thirds of children experiencing wasting lived in Asia and over a quarter in Africa. At the other end of the spectrum, 41 million children under age 5 were overweight in 2016, up from 31 million in 1990.

37. In 2016, over 3.4 million children with severe acute malnutrition accessed treatment services in 72 countries. While the number of children accessing treatment continues to increase, further work is required to scale up treatment services globally, alongside continued investments to prevent malnutrition through multisectoral, risk-informed programming.

38. Globally, millions of children continue to suffer from micronutrient deficiencies, which can lead to poor growth, delayed cognitive development, weakened immunity, disability, disease and even death. An estimated 29 per cent of children 6 to 59 months of age suffer from vitamin A deficiency in low-and middle-income settings. Furthermore, 43 per cent of preschool-age children and 29 per cent of women of reproductive age suffer from anaemia, often due to iron deficiency.

39. Improving nutrition is critical to achieving the Sustainable Development Goals, and nutrition has been included in the related indicator framework. In order to address the multiple nutrition challenges, which tend to affect the most disadvantaged, the global nutrition community strives to create a more enabling environment for the scale-up of nutrition programmes. By the end of 2016, 58 countries had joined the Scaling Up Nutrition movement, which supports multisectoral and coordinated actions to scale up evidence-based, costed nutrition plans. Of the 58 countries, 49 had national multi-stakeholder platforms in place.

40. The importance of breastfeeding was reconfirmed by new evidence that the lives of some 800,000 children and 20,000 mothers can be saved every year by improving breastfeeding rates. Breastfeeding also contributes crucially to brain development and the prevention of overweight and obesity, yet only 43 per cent of infants under six months of age were breastfed exclusively in 2016.

41. Iodine deficiency is a common cause of preventable cognitive impairment. The introduction of adequately iodized salt into food chains has led to remarkable decreases in iodine deficiency worldwide. The number of countries with deficient iodine intakes has declined from 47 in 2007 to 20 in 2016. On the basis of a redefined indicator, 87 per cent of households were consuming salt with some iodine in 2016.

42. For women of childbearing age, fortifying commonly consumed cereal grains such as wheat flour, maize flour and rice is an important means to prevent birth defects and anaemia. At the end of 2016, 87 countries had legislation to mandate fortification of at least one industrially milled cereal grain. For young children, home fortification using micronutrient powders is a more targeted approach currently operating in at least 65 countries worldwide.

43. In least developed countries, 52 per cent of children receive complementary foods with adequate frequency, 29 per cent meet the criteria for the minimum dietary diversity and 16 per cent have a minimum acceptable diet. Further, only one in four of the poorest children in least developed countries are meeting the minimum requirement for dietary diversity among children from 6 to 23 months of age.

44. In 2015, 6.6 billion people used improved drinking water sources; the rate was 96 per cent in urban areas but only 84 per cent in rural areas. Less than half (42 per cent) of least developed countries have gained access to improved drinking water since 1990. In 2015, 4.9 billion people used improved sanitation facilities, and while the number of rural people not using basic sanitation has declined from 1.9 to 1.7 billion since 2000, it has increased from 580 to 700 million in urban areas. According to the 2015 child mortality report,[4] about 2,000 children die each day from diarrhoeal disease owing to a lack of access to safe drinking water, sanitation and basic hygiene.

45. The targets associated with Sustainable Development Goal 6 for universal access to drinking water and for sanitation and hygiene are ambitious, given the challenges to resource mobilization and the conditions prevailing in many countries. The June 2017 report of the WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation estimates that the number of people without access to water and sanitation is expected to increase in the near future. Sustainable provision of water and sanitation services will require transformational change in structural and institutional factors and strengthening of sector governance functions at national and subnational levels.

46. Ending open defecation, which was still practised by 1 billion people in 2016, and achieving universal access to basic sanitation by 2030 will require a substantial acceleration in progress, particularly in rural areas, where 9 out of 10 people who practise open defecation live. This is largely centred in Central and Southern Asia, Eastern and Southeast Asia and sub-Saharan Africa. In 2016, it was estimated that girls and women collectively spend 97 billion hours annually securing a safe place to defecate. Fetching water is another challenge, especially for children and women, who globally spend a cumulative 73 billion hours fetching water annually. While hygiene behaviours have improved, the proportion of people with hand-washing facilities consisting of soap and water at home needs to be increased.

47. Early childhood development has achieved prominence since its mention in the Sustainable Development Goals, making attention to this issue fundamental to meeting the targets of the 2030 Agenda. Furthermore, the commitment of global leaders has contributed to raising its profile, leading to a 10 per cent increase since 2014 in the number of national Governments in low- and middle-income countries that have adopted relevant policies. In the majority of these countries, programming is built around the latest neuroscience findings, which underline the strategic importance of a holistic approach towards child well-being and development, particularly in the first 1,000 days of life. Based on these findings, a shift is now under way from advocacy to policy and programme implementation.

48. Despite the progress in the field of early childhood development, findings show that 43 per cent, or about 250 million, of the world's children under age 5 in low- and middle-income countries are still at risk of not achieving their developmental potential because of extreme poverty and stunting. The economic consequences of this tragedy are borne by individuals and society in terms of poor learning, lower wages and higher unemployment, resulting in almost a 25 per cent loss in annual income per capita. Meanwhile, quality integrated early childhood development programmes are affordable, estimated to require an additional 50 cents per capita per year. The affordability outweighs the cost of inaction, especially when considering that this investment could yield a return of almost 13 per cent annually.

[4] Inter-Agency Group for Child Mortality Estimation, *Estimation, Levels and Trends in Child Mortality: Report 2015* (UNICEF, New York, 2015).

49. A nurturing environment is fundamental to a young child's development, which includes good quality nutrition, health care, social services, stimulation and early learning programmes. Nutrition, stimulation and protection are key elements to reduce the development gaps that often place children from the least developed countries and poorer families at a disadvantage starting out in life. Nonetheless, data show that only 13 per cent of these children aged 3 and 4 have access to such programmes.

B. Providing quality education

50. The Sustainable Development Goal for education calls for the international community to ensure inclusive and equitable quality education and promote lifelong learning opportunities for all. It embodies a commitment to equity for all children, holds high expectations for learning and embraces ambitious targets for universal primary education and increased access to pre-primary and secondary education. One year into implementation of the Goals, the global education community continues to address the unfinished business of providing quality primary education to all children, while also building capacity for progress towards universal access to pre-primary and secondary education, particularly for the most marginalized children.

51. In 2016, there were 100 million more children and adolescents enrolled in primary and secondary schools than a decade ago. The primary school completion rate increased from 82 per cent in 2000 to 90 per cent in 2014. Among youth aged 15 to 24, the literacy rate improved from 83 per cent to 91 per cent between 1990 and 2015, and the gap between women and men narrowed. Gender parity has been achieved in primary completion, with girls very slightly disadvantaged (gender parity index of 0.99), and in lower secondary completion, with boys very slightly disadvantaged (gender parity index of 1.01). However, the global statistics mask continuing in-country variations and an increase in the number of countries where boys are disadvantaged.

52. However, going to school is not enough — children need to learn. An estimated 250 million primary school-age children are failing to learn basic numeracy and literacy, including the 130 million children who have reached grade 4. If current trends continue, in 2030 some 1.5 billion adults will have had no education beyond primary school, and they will come disproportionately from low-income countries and marginalized communities.

53. Education is both a right enshrined in the Convention on the Rights of the Child and a key lever for economic growth, poverty reduction, inclusion and gender equality, empowerment and health. On average, each additional year of schooling can add up to 18 per cent to a nation's gross domestic product per capita.[5] Educating girls is a particularly transformative force: half of the 1970 to 2009 reduction in under-five mortality can be traced to increases in the average years of schooling of women of reproductive age.[6] Educated people tend to be more empowered and socially more tolerant and resolution-seeking. Greater equity in education has been linked to a reduced likelihood of violent conflict. One reason for limited progress is the continued exclusion of the most marginalized and vulnerable groups from

[5] J. Crespo Cuaresma, W. Lutz and W.C. Sanderson, "Age structure, education and economic growth" (Laxenburg, Austria, International Institute For Applied Systems Analysis, October 2012), available from http://pure.iiasa.ac.at/10263/1/IR-12-011.pdf.

[6] Emmanuela Gakidou and others, "Increased educational attainment and its effect on child mortality in 175 countries between 1970 and 2009: a systematic analysis", *The Lancet*, vol. 376, No. 9745 (18 September 2010), pp. 959-974.

education and learning, starting in early childhood. Progress will not be possible without specific efforts towards increased inclusion.

54. Recent reports show that pre-primary education is among the most effective practices in improving education outcomes, leading to better learning outcomes in the long run and improving education system efficiency.[7] Today, nearly two thirds more children are enrolled in early childhood education than in 1999. Yet in many countries, the subsector is still extremely underfunded and in its earliest stages of development. Children from the poorest households are almost six times less likely to attend an early childhood education programme than those from the richest. The majority of low-income countries allocate less than 2 per cent of public education budgets to pre-primary education and are not adequately equipped to implement scale-up. Early learning may be the subsector with the largest gap between evidence and practice, and there is a great need to ground the subsector in the latest developments in cognitive neuroscience, with sound policies and coordination.

55. In the past three years, the number of children enrolled in primary school has increased by 18.5 million. Despite progress, 121 million children of primary and lower-secondary school age are out of school worldwide, and this figure rises to about 263 million when children of upper-secondary school age are included. The stagnation in the absolute number is largely attributable to the increase of school-age populations. This challenge is most severe in the Eastern and Southern Africa and West and Central Africa regions, where the school-age populations are projected to more than double by 2030. Further, of the 61 million children of primary school age out of school, approximately 26 million will never enter school, 23 million will enter late and 12 million have already left school.

56. Only 39 per cent of countries have a rate below 5 per cent of out-of-school children of secondary school age. While in most countries, children living in poverty are most likely to be out of school, other factors of exclusion include ethnicity, gender, location and child labour. In addition, despite a paucity of data in this area, existing evidence suggests that disability is also a major factor of exclusion. Today's refugee crisis creates new challenges to reaching those most in need of support, including adolescents. Globally, 142 million adolescents of upper-secondary school age are not in school. One challenge in increasing access to education for children in humanitarian, migrant or refugee situations is the pressure to expand education systems rapidly within existing resource constraints.

57. Almost 40 per cent of children of primary school age are not learning the basics of reading and mathematics.[8] These numbers show that significant growth in enrolment since 2000 has not been matched by quality and learning outcomes. Children from disadvantaged regions of poor countries are lagging even further behind.

58. Teachers have a big impact on children's learning, but in many countries, there is a continuing shortage of well-trained, motivated and supported teachers. The report of the International Commission on Financing Global Education Opportunity[7] calls for investment in the education workforce to reimagine its potential for the future. Demand for teachers in low-income countries will nearly double by 2030. Innovation will be essential to meet this demand while taking advantage of the opportunity to reinvigorate the teaching force with a new focus on learning excellence.

[7] International Commission on Financing Global Education Opportunity, "The learning generation: investing in education for a changing world" (2016).

[8] United Nations Educational, Scientific and Cultural Organization, *Education for All Global Monitoring Report 2013/2014* (Paris, 2014).

59. Girls remain disadvantaged in a significant number of countries, and boys are disadvantaged in an increasing number of countries. Positive trends in girls' education, such as increasing primary completion rates and lower-secondary enrolment, have not yet benefited all girls, and significant proportions of secondary-age girls have never been in school or remain far from accessing lower-secondary education. In most sub-Saharan African countries, for example, girls from the poorest households remain most disadvantaged in terms of school participation. If current trends continue, these girls are not expected to achieve universal lower-secondary completion until year 2111. Poverty and location often combine with gender to create deep inequalities within countries, even where parity at the national level is close to being achieved. Strategies to address gender inequities are context-specific, but might include reducing the costs of education, for example through cash transfers, reducing the distance to school, tackling gender-based violence within and around schools and working with communities to support girls' access and retention.

60. While the available data regarding children with disabilities are incomplete and of poor quality, there is evidence that these children make up one of the most marginalized groups and are commonly excluded from education opportunities. Global estimates suggest that approximately 5 per cent of children in any country will have a severe or moderate disability or learning difficulty, but education-management information systems in low- and middle-income countries rarely collect reliable data on children with disabilities.

61. A major recent development is the increased number of children being schooled in emergency contexts. For example, the United Nations Relief and Works Agency for Palestine Refugees in the Near East supported more than 45,000 Palestine refugee students in the Syrian Arab Republic through a network of 101 schools and provided support to more than 1,800 teachers. There are a number of challenges for educating children in emergency settings, including low and unpredictable levels of funding for education in crisis situations; weak coordination; and stretched capacities to efficiently respond to education emergencies. To address some of these challenges, the Education Cannot Wait fund is mobilizing resources for investments to ensure that all children, especially those living in emergencies and protracted crises, continue to learn.

62. Funding, whether from domestic or external sources, is insufficient for education in developing countries. Only 21 per cent of low- and middle-income countries devote at least 20 per cent of government expenditure to education. In the least favourable country context, it has been estimated that the poorest children benefit from 18 times less public education financing than the wealthiest.

63. Critical to addressing these challenges are strong and responsive education systems, including evidence-based national education sector plans. There have always been many challenges to education but the increased focus on learning outcomes means that strong systems are ever more important, including at the decentralized level, where schools and districts will need to take much more responsibility for improving learning outcomes. This requires empowerment, financing and training. Successful education systems are those that provide good-quality learning for all students. Support for adolescents must connect back to the early years, before disadvantaged children leave the education system.

C. Protecting against abuse, exploitation and violence

64. Considerable progress has been made in the area of child protection. In 2016, the births of more than 12.3 million children were registered in 70 countries, and

131 countries reported registration systems that are free, universal and continuous. In 2016, almost 1.9 million children were registered in alternative care across programme countries, a 20 per cent increase since 2014. In the same year, corporal punishment of children was prohibited in schools in 128 countries, one more than in 2015.

65. More than 7.5 million children at risk were prevented from engaging in and/or were withdrawn from child labour in 52 countries, up from 5.6 million children in 2015. The Food and Agriculture Organization of the United Nations plays a leading role in sustainably preventing and reducing child labour in agriculture. It does this by providing technical support for the development of policies and guidelines and enhancement of cooperation between national ministries of labour and agriculture. Countries such as Cambodia, Lebanon, Mali, Niger, Senegal, Malawi and the United Republic of Tanzania are increasingly addressing child labour as an integral part of national agricultural policies and programmes.

66. The UNFPA-UNICEF Global Programme to Accelerate Action to End Child Marriage has reached more than 1 million girls through support for life skills and school attendance and engaged 1.6 million individuals in dialogue to support adolescent girls. In 2016, the UNICEF-UNFPA Joint Programme on Female Genital Mutilation/Cutting: Accelerating Change reached almost 8.5 million people across 17 countries. Close to 3,000 communities declared the abandonment of female genital mutilation/cutting in 2016, compared with 2,000 communities in 2015. Prevalence has fallen significantly among younger women and girls in the three highest female genital mutilation-prevalent countries with available data.

67. In terms of strengthening capacity to tackle online sexual exploitation during 2016, eight national policies or action plans were adopted and legislative reform is under way in 10 countries. Seventy countries have also joined a global commitment to protect children from sexual abuse and exploitation online. The UNICEF global programme to strengthen capacity to tackle online child sexual exploitation has reached 13 million people through awareness-raising campaigns, while 60,000 children, parents and teachers and more than 1,000 law enforcement and judicial officers, 2,000 service providers and 1,000 industry representatives were provided with training and information.

68. Support to child protection was provided by UNICEF in 132 countries through development or implementation of legislation, policies and standards, alongside strengthening of direct service provision. Increasingly, the focus is on building cross-sectoral linkages with health and education and social protection. At least 43 countries reported having child protection legislation consistent with or better than international standards, an increase of eight from 2015. There was a 20 per cent increase in the number of countries reporting compliance of their justice systems with the minimum standards set in the United Nations Standard Minimum Rules for the Administration of Juvenile Justice.

69. During 2016, psychosocial interventions aided about 2.9 million girls and boys in 68 countries, including through the provision of child-friendly spaces and community- and school-based interventions. In 2016, nearly 4.6 million women and children in humanitarian situations across 53 countries received assistance from UNICEF to address a range of safety and protection issues related to gender-based violence. Some 3.9 million girls and boys received mine-risk education in 22 countries and territories — an increase of almost 40 per cent from previous years, owing mainly to work in the Syrian Arab Republic and Yemen. UNICEF and partners invested significant efforts to support unaccompanied and separated children during 2016, resulting in 32,905 children receiving appropriate alternative-care arrangements and 21,994 being reunified with families and caregivers. Around

21,400 children were released from armed forces or groups, a twofold increase compared to 2015. Around 53 per cent of children were reintegrated with their families and communities, and 59 per cent received assistance.

70. Concerning the migration movements to Europe, with a large influx of child refugees, UNICEF supported European authorities in accommodating migrant and refugee children and ensuring respect for their rights. In 2016, in five countries, 95,997 children were reached with emotional and psychosocial support, family-reunification services and recreational and basic education activities. A further 12,624 children at risk were referred to specialized care and services.

71. UNICEF continues to support the ongoing implementation of action plans to prevent and end grave violations against children in armed conflict, with all seven remaining Governments involved in the Children, Not Soldiers campaign having signed action plans. In addition, the grave violation of abduction was established as a "trigger" violation through Security Council resolution 2225 (2015).

D. Combating HIV and AIDS

72. The scale-up of prevention of mother-to-child transmission of HIV is one of the greatest public health achievements of recent times, averting 1.6 million new infections among children under 15 years of age since 2000. Services are increasingly integrated, new ways of delivering those services have been introduced and antiretroviral regimens to prevent children from acquiring HIV and to support maternal health have improved. In 2016, Armenia, Belarus and Thailand joined Cuba to receive the WHO certification for elimination of mother-to-child transmission of HIV, and several other countries are on track to achieve this endorsement within a few years. From 2005 to 2015, there was a 60 per cent decline in new HIV infections among children, from 270,000 in 2009 to 110,000, among the 21 countries in sub-Saharan Africa that were part of the Global Plan towards the Elimination of New HIV Infections among Children by 2015 and Keeping Their Mothers Alive. In 2015, of the estimated 1.4 million women who were pregnant and living with HIV, more than 1 million received the most-effective regimens of antiretroviral medications, with an estimated 79 per cent coverage in sub-Saharan Africa.

73. However, notable gaps continue to exist. An estimated 150,000 children below 15 years of age were newly infected with HIV in 2015, nearly 85 per cent of them living in sub-Saharan Africa. The majority of these infections occurred during breastfeeding. The shift in the timing of HIV transmission from mother to child has created a new urgency for focusing on adherence to medicinal regimes and retaining mothers and infants to the end of the breastfeeding period. Furthermore, half of the 1.8 million children under 15 years of age living with HIV did not receive treatment in 2015, and when they did gain access, it often came too late, with the average age of treatment initiation at three and a half years in sub-Saharan Africa.

74. Progress in preventing new infections among adolescents has been unacceptably slow, and projections indicate that current efforts would not decrease HIV incidence among adolescents even if the rate of new HIV infections among adolescents stalled at 250,000 cases between now and 2021. The disproportionate impact among key populations is underscored by estimates indicating that almost one third of all new infections among adolescents 15 to 19 years of age occurred outside sub-Saharan Africa.

75. In 2015, there were still more than 13 million children who had lost one or both parents to AIDS. Remarkable gains, however, have been made in mitigating the economic and social impact of HIV and AIDS on children and families over the past

decade. Evaluations of national social-protection programmes have established that social protection, in particular cash transfers, contribute to improving access to health, education and nutrition, strengthening social networks, increasing access to HIV and AIDS treatment and prevention and reducing adolescent vulnerability and risk-taking.

76. The current state of the AIDS response calls for innovation in implementation, dissemination and optimization, using lessons learned as the basis to refine new action. The work must extend across development sectors and must also engage with non-traditional actors who meet the needs of children, adolescents and their families where they are, throughout their lives. Ending AIDS requires addressing the social and economic factors that continue to fuel the AIDS epidemic. Poverty, food insecurity, drug and alcohol use, social marginalization, exclusion, stigma, inequity, gender inequality, violence and sexual exploitation all increase risk and decrease resilience in vulnerable populations. Social protection and the protection, care and support of children must underpin multisectoral efforts to scale up high-impact interventions through the first two decades of life.

IV. Ways forward

77. The world is changing quickly, and so too are the threats and challenges facing its children. Yet children's rights remain the same; they are immutable, indivisible and universal. To meet these challenges and achieve the Sustainable Development Goals, partners must be sufficiently nimble and adaptable to respond to the changing dynamics. Responding effectively to the 2030 Agenda will require important shifts in what Governments and partners do and how they work. It will be necessary to pursue strategic partnerships across the United Nations system, the private sector and civil society to respond in an integrated way to other challenges to child well-being highlighted by the Agenda, including climate change, urbanization, displacement, the demographic transition and growing challenges in the second decade of life.

78. The fifteenth anniversary of "A world fit for children", following the adoption of the Sustainable Development Goals and other major global agreements, presents an opportunity to take stock and review ways in which efforts to implement the 2030 Agenda can pay particular attention to reducing inequality among children. Despite the uncertain outlook, the potential for transformative change has never been greater. The world has a new commitment, and increasingly the knowledge and means, to overcome critical obstacles that prevent children from realizing their potential and their rights. Without ambitious action on sustainable development, humanitarian assistance and climate change, the promise of progress brought about by new agreements risks becoming a tragedy for the world's youngest citizens. And to reach the Sustainable Development Goals by 2030, we must reach the most disadvantaged children.